Instruction for use of "Annual Solvent Emissions Report" Form

General

The "Annual Solvent Emissions Report" form may be used by an **affected facility** that operates a halogenated solvent cleaning operation to comply with the annual solvent emissions reporting requirements in 8.10.6 of Section 8.0 of Regulation 1138 (Section 8). The use of this form is optional. However, other means of reporting must contain the information required under 8.10.6.1 through 8.10.6.7 of Section 8.

"Affected facility" means, for the purposes of 8.0 of this regulation, all solvent cleaning machines subject to 8.0, except for the following.

- Solvent cleaning machines used in the manufacture or maintenance of aerospace products.
- Solvent cleaning machines used in the manufacture of narrow tubing.
- Continuous web cleaning machines, located at a major source that is subject to the facility-wide limits in 8.10.2.2 of this regulation.
- Cold batch cleaning machines, located at an area source that is subject to the facility-wide limits in 8.10.2.2 of this regulation.

Required Submittal Date

The owner or operator of an **affected facility** that operates a halogenated solvent cleaning operation shall submit an annual solvent emissions report to the Department (with copy to the U.S Environmental Protection Agency) no later than February 1 of the year following the calendar year for which the reporting is being made.

The addresses for this submittal are provided below and in Item 8 of the "Annual Solvent Emissions Report" form.

Items 1

Provide the name of the affected facility that operates a halogenated solvent cleaning operation.

Items 2

Provide the physical location of the affected facility that operates a halogenated solvent cleaning operation and the address where any compliance records are kept, if different than the physical location of the affected facility.

Items 3

Provide the name and address of the owner or operator of the affected facility that operates the halogenated solvent cleaning operation identified in Items 1 and 2.

Item 4

The owner or operator shall identify the reporting period (calendar year) in the space provided.

Item 5

The owner or operator shall provide the average monthly halogenated HAP solvent consumption for the affected facility during the reporting period in kilograms per month results calculated each month under 8.10.3.1 of Section 8.

Instruction for use of "Annual Solvent Emissions Report" Form

(Continued)

Item 6

The owner or operator shall provide the facility-wide 12-month rolling total halogenated HAP solvent emissions results calculated each month during the reporting period under 8.10.3.1 of Section 8.

Item 7

The responsible person, as defined in 3.2 of Regulation 1138, must certify that the statements and information contained in the initial statement of compliance are true, accurate, and complete.

The responsible person must also sign the "Annual Solvent Emissions Report" form and provide the information requested.

Item 8

The owner or operator must submit the completed "Annual Solvent Emissions Report" form to the Department of Natural Resources and Environmental Control (with a copy to the U.S. Environmental Protection Agency) at the addresses provided below and in Item 8 of the form. The owner or operator should keep a copy of the completed form.

Submit the Annual Solvent Emissions Report to the following addresses

Delaware Department of Natural Resources and Environmental Control Director of Air Quality Blue Hen Corporate Center 655 S Bay Road, Suite 5N Dover, DE 19901

U. S. Environmental Protection Agency Director, Air Protection Division 1650 Arch Street Philadelphia, PA 19103

Annual Solvent Emissions Report

For additional facility-wide requirements applicable to affected facilities

Regulation 1138 – Section 8

Emission Standards for Halogenated Solvent Cleaning

	Submittal Date: This "Annual Solvent Emi February 1 following the e		nitted no later tha	n
[1]	Name of the facility:	nd of the reporting period.		
[2]	Physical location – Street Address:			
	City, State, Zip Code:			
	Address where any compliance records are kept, if o	different than the physical	location	
	Street Address:			
	City, State, Zip Code:			
[3]	Name of Owner or Operator:			
	Mailing Address:			
F 47	City, State, Zip Code:			
[4]	Identify the reporting period covered by this Annu January 1 to December 31,	al Solvent Emissions Repo	rt".	
	Junuary 1 to December 31,			
[5]	Provide average monthly halogenated HAP solvent consumption for the affected facility during the reporting period.			
	Average monthly halogenated HAP solvent consumption	on for the affected facility		Kilograms/Month
[6]	Provide the facility-wide 12-month rolling total hale reporting period.	ogenated HAP solvent emis	ssion calculated	in each month of the
	January kilograms May	kilograms	September	kilograms
	February kilograms June	kilograms	October	kilograms
	March kilograms July	kilograms	November	kilograms
	April kilograms August	kilograms	December	kilograms
[7]	I certify that all the information contained in this no	tification is true, accurate,	, and complete.	
	Signature:		Date:	
	Title/Position:	Tale	ephone No:	
		100	prione No.	
	Email Address:			
	Printed Name:			
[8]	The owner or operator must submit this "Initial No provided above. Remember to keep a copy of this		owing agencies b	y the submittal date
	Delaware Department of Natural Resources and Environmental Control Director of Air Quality Blue Hen Corporate Center 655 S. Bay Road, Suite 5N Dover DE 19901	Director, A 1650 Arch	ronmental Protection Diraction Diraction Diraction Diraction Diraction PA 19103	